FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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3235-0076 OMB Number:

April 30, 2008 Expires:

Estimated Average burden hours per response.

SEC USE ONLY						
Prefix	Serial					
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	DATE RECEIVED					
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Name of Offering '(check if this is an amendment and	name has changed, a	ind indicate char	ige.)	
Preferred B Units and Common Unit Purchase War	rants			
Filing Under (Check box(es) that apply): Type of Filing: New Filing Amendment	1 □ Rule 505 🛛	Rule 506	Section	4(6) □ ULQE
A.	BASIC IDENTII	FICATION DA	ATA .	1 127% 1017 1540 1555 1500 1000 1500 1500 1500 1500
Enter the information requested about the issuer				
Name of Issuer (check if this is an amendment and	name has changed, a	and indicate char	nge.)	07086072
AdaptivEnergy LLC				
Address of Executive Offices (N	Number and Street, C	City, State, Zip C	ode)	Telephone Number (Including Area Code)
1000 Lucas Way, Suite B, Hampton, VA 23666				(757) 320-4119
Address of Principal Business Operations (if different from Executive Offices)	PROC	ESSED	ode)	Telephone Number (Including Area Code)
Brief Description of Business	DEC 1	9 2007		
Electrical equipment and component manufacturer	DC.0 1	3 2007		
Type of Business Organization	THON	ISON		
	hip, alread FilhAr hip, to be formed	ICIAL	Ø (ther (please specify): Limited liability company
	Month	Year		
Actual or Estimated Date of Incorporation or Organization:	01	2003	Actua	l Estimated
Jurisdiction of Incorporation or Organization: (Enter tw	vo-letter U.S. Postal	Service abbrevia	ition for	State:
CN	for Canada: FN for o	ther foreign juri:	sdiction	VA

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

<u> </u>	• • • •	<u> </u>			
Check Box(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if Vogeley, James H.	individual)				
Business or Residence Addres	s (Number and Str	eet City State Zin Code)			
c/o AdaptivEnergy LLC, 100					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Maxwell, Craig	•				
Business or Residence Addres	s (Number and Stre	eet, City, State, Zip Code)			
c/o AdaptivEnergy LLC, 100		-			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Naderi, Akbar					
Business or Residence Address	s (Number and Str	eet, City, State, Zip Code)			
c/o AdaptivEnergy LLC, 100	00 Lucas Way, Suite	B, Hampton, VA 23666			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)		· · · · · · · · · · · · · · · · · · ·		
Suttle, Gary					
Business or Residence Address	s (Number and Str	eet, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
c/o AdaptivEnergy LLC, 100	00 Lucas Way, Suite	B, Hampton, VA 23666			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			··	
Rocke, Michael					
Business or Residence Address	s (Number and Str	eet, City, State, Zip Code)			
c/o AdaptivEnergy LLC, 100	00 Lucas Way, Suite	B, Hampton, VA 23666			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	indiviđual)				
East, Joe					
Business or Residence Address	s (Number and Stre	eet, City, State, Zip Code)			
c/o AdaptivEnergy LLC, 100	00 Lucas Way, Suite				
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if PK Partners	individual)				
Business or Residence Addres	s (Number and Str	set City State 7in Code)			
c/o AdaptivEnergy LLC, 100	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				Managing Farmer
Suttle Motor Corp.					
Business or Residence Address	s (Number and Stre	eet, City, State, Zip Code)			
c/o AdaptivEnergy LLC, 100	00 Lucas Way, Suite	B, Hampton, VA 23666			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Parker Hannifin Corporation	n				
Business or Residence Addres	s (Number and Stre	eet, City, State, Zip Code)			
c/o AdaptivEnergy LLC, 100	00 Lucas Way, Suite	B, Hampton, VA 23666			

	P. BIA 180 C. CE. 28CD C. CLUCKRISH							
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes 🗌 No 🛛						
	Answer also in Appendix, Column 2, if filing under ULOE.							
2.	What is the minimum investment that will be accepted from any individual?	\$N/A						
3.	Does the offering permit joint ownership of a single unit?	Yes 🖾 No 🗌						
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. *NO COMMISSIONS TO BE PAID*							
Full	Name (Last name first, if individual) N/A							
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)							
Nam	e of Associated Broker or Dealer							
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
	(Check "All States" or check individual States)	All States						
	AL AK AZ AR CA CO CT DE DC FL GA F	ID ID						
	IL IN IA KS KY LA ME MD MA MI MN M	MO MO						
	MT NE NV NH NJ NM NY NC ND OH OK O	PA PA						
	RI SC SD TN TX UT VT VA WA WV WI W	YY PR						
Full l	Name (Last name first, if individual)							
Busin	ness or Residence Address (Number and Street, City, State, Zip Code							
Nam	e of Associated Broker or Dealer							
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
	(Check "All States" or check individual States)	☐ All States						
	AL AK AZ AR CA CO CT DE DC FL GA	HI ID						
	IL IN IA KS KY LA ME MD MA MI MN	MS MO						
	MT NE NV NH NJ NM NY NC ND OH OK	OR PA						
	RI SC SD TN TX UT VT VA WA WV WI	WY PR						
Full l	Name (Last name first, if individual)							
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)							
Nam	ne of Associated Broker or Dealer							
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
	(Check "All States" or check individual States)							
	AL AK AZ AR CA CO CT DE DC FL GA HI	ID						
	IL IN IA KS KY LA ME MD MA MI MN MS	S MO						
	MT NE NV NH NJ NM NY NC ND OH OK OR	PA PA						
	RI SC SD TN TX UT VT VA WA WV WI WY	/ PR						

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	aneady exchanged.	Aggregate		Amount Already
	Type of Security	Offering Price		Sold
	Debt	\$:	5
	Equity	\$ <u>5,153,808.17</u>	!	615,233.00
	☐ Common Preferred			
	Convertible Securities (including warrants)	\$ ²	:	5
	Partnership Interests	·		<u> </u>
	Other (Specify)	· ·	,	
			•	·
	Total	\$ <u>5,153,808.17</u>	;	615,233.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		,	615,233.00
	Non-accredited Investors	•	,	<u> </u>
			`	
	Total (for filings under Rule 504 only)		•	B
An:	swer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	•	9	S
	Regulation A			5
	Rule 504			
	Total			<u> </u>
			•	•
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees]	<u> </u>
	Printing and Engraving Costs	[] :	5
	Legal Fees	D	a •	1,000.00
	Accounting Fees			3
	Engineering Fees			S
	Sales Commissions (specify finders' fees separately)	_		
			_	350.00
	Other Expenses (identify) Blue Sky Form D filing fees			350.00
	Total		9 9	1,350.00

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The aggregate offering amount includes an additional \$153,808.17 that may be received upon exercise of the common unit purchase warrants to receive additional common units.

² One-fourth of one common unit purchase warrant is included in the purchase price of each Preferred B unit. Each unit included one-fourth of one common unit purchase warrant. Each whole common unit purchase warrant may be exercised for a period of 7 years for one common unit at an exercise price of \$0.0748 per common unit.

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	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	\$ <u>5,152,458.17</u>			
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.				
		c	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees		\$		\$
	Purchase of real estate		\$		s
	Purchase, rental or leasing and installation of machinery and equipment		\$		s
	Construction or leasing of plant buildings and facilities		s		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		¢.		•
				_	3
	Repayment of indebtedness.				
	Working capital		s	\boxtimes	\$ <u>5,152,458.17</u>
	Other (specify)				
			c		•
			-	_	3
	Column Totals		\$	\boxtimes	\$ 5,152,458.17
	Total Payments Listed (column totals added)		⊠ \$ <u>5,1</u>	152,458.	<u>.17</u>
	12 PAULE - BUS 1" BE				
he	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice	ine is	filed under Rule S	05 the f	ollowing signature
ons	titutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission upon writessuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502	tten re	equest of its staff, the	he inform	nation furnished by
			<u> </u>		
		Date			
	······································	Dece	ember		
	e of Signer (Print or Type Title of Signer (Print or Type)		,		
am	es H. Vogeley / Chief Executive Officer				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

